



JUN 2 6 2017 FCC Mail Room

### **REDACTED - FOR PUBLIC INSPECTION**

June 20, 2016

Via Electronic Filing

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12<sup>th</sup> Street, SW Washington, DC 20554 DOCKET FILE COPY ORIGINAL

Re:

WC Docket No. 14-58

2016 ETC Annual Report Pursuant to 47 C.F.R. § 54.313 and 54.422

2016 ETC Annual Report of Surry Telephone Membership Corp., Study Area Code 230503

Dear Secretary,

On behalf of Surry Telephone Membership Corp., we have attached for filing confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to 47 CFR 54.313 and 47 CFR 54.422 of the Commission's rules. Surry Telephone Membership Corp seeks confidential treatment under the Commission's existing confidentiality rules at 47 CFR 0.457 and 47 CFR 0.459 for the information filed pursuant to Section 54.313(a)(1) and Section 54.313(f)(2) of the Commission's regulations<sup>1</sup>. The redacted version is also being filed this date via the FCC's Electronic Comment Filing System.

Sincerely,

/s/ Leah Richter
Senior Financial Analyst
Phone: (605) 995-1793
Fax: (605) 995-1778
Leah.Richter@Vantagepnt.com

No. of Copies rec'd 04

Enclosure(s)

cc:

Amy Hanson, COO, Surry Telephone Membership Corp Charles Tyler, Telecommunications Access Policy Division

<sup>&</sup>lt;sup>1</sup> Connect America Fund et al., WC Docket No. 10-90 et al., Protective Order, 27 FCC Rcd 14231 (Wireline Comp. Bur. 2012) (Protective Order).

<010>	Study Area Code	230503	
<015>	Study Area Name	SURRY MEMBERSHIP	
<020>	Program Year	2018	Received & Inspecter
<030>	Contact Name: Person USAC should contact with questions about this data	Leah Richter	JUN 2 5 2017
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6059951793 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	Leah.Richter@vantagepnt.com	=CC Mail Roon
	Form Type	54.313 and 54.422	

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							<b>\</b>	Preventative Dracedures	FIOCEUMIES													
							\$	Service Outage	Resolution					-								
						ı	\$	Did This Outage Affect Multiple Study Areas	(165 / 100)													
							é ,	Service Outage Description (Check	מוו ניומר מאאונא													
							<b>♦</b>	911 Facilities Affected	/nu / ca /													
	SHIP			xt.	Leah.Richter@vantagepnt.com	No	\$	Total Number of	CUSTOTIEE													
230503	SURRY MEMBERSHIP	2018	Leah Richter	> 6059951793 ext		service outages?	\$	Number of Customers Affected														
			data	n data line <030>	in data line <030>	le voice servic	                   	D.														
			Contact Name - Person USAC should contact regarding this data	Contact Telephone Number - Number of person identified in data lir	Contact Email Address - Email Address of person identified in data lii	<210> For the prior calendar year, were there any reportable voice	<	Outage End Date														
			should contact	Number of per	I Address of pe	ır, were there	<	Outage Start Outage Start Date Time														
-p	me		- Person USAC	hone Number -	Address - Emai	calendar yea	b1>	Outage Start Date														
Study Area Code	Study Area Name	Program Year	Contact Name	Contact Telepl	Contact Email	For the prior	<b>\ae</b>	NORS Reference Number							_							
	<015>	<020>	<030>	<032>	<039>	<210>	<220>															_

		Town 2005 Takin 2005 Takin 2005 Canada	
<010>	<010> Study Area Code		230503
<015>	<015> Study Area Name		SURRY MEMBERSHIP
<020>	<020> Program Year		2018
<030>	<030> Contact Name - Person USAC should contact regarding this data		Leah Richter
<035>	<035> Contact Telephone Number - Number of person identified in data li	a line <030>	6059951793 ext.
<039>	<039> Contact Email Address - Email Address of person identified in data li	a line <030>	Leah.Richter@vantagepnt.com
<300> ∟	<300> Unfulfilled service request (voice)		0
<310>	<310> Detail on attempts (voice)		
		Name	Name of Attached Document
<320>	<320> Unfuffilled service request (broadband)		1
	230503nc330	30.pdf	
<330>	<330> Detail on attempts (broadband)		
		Š	Name of Attached Continuent



<010>	Study Area Code	330503	
<015>	Study Area Name	URRY MEMBERSHIP	
<020>	Program Year	118	
<030>	Contact Name - Person USAC should contact	regarding this data Leah F	dichter
<035>	Contact Telephone Number - Number of per <030>	son identified in data line	6059951793 ext.
<039>	Contact Email Address - Email Address of per <030>	son identified in data line	Leah.Richter#vantagepnt.com
<400>	Select from the drop-down list to indicate hovoice complaints (zero or greater) for voice to calendar year for each service area in which yany facilities you own, operate, lease, or other	elephony service in the prior you are designated an ETC fo	
<410>	Complaints per 1000 customers for fixed voice	ce	0.0
<420>	Complaints per 1000 customers for mobile vo	oice	0.0
<430>	Select from the drop-down list to indicate ho end-user customer complaints (zero or great the prior calendar year for each service area an ETC for any facilities you own, operate, lea	er) for broadband service in in which you are designated	Offered both fixed and mobile broadband
<440>	Complaints per 1000 customers for fixed bro	adband	0.0
<450>	Complaints per 1000 customers for mobile be	roadband	0.0

<010>	Study Area Code	230503
<015>	Study Area Name	SURRY MEMBERSHIP
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter
<035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@vantagepnt.com
<500>	Certify compliance with applicable service quality standards and consumer pr	rotection rules Yes
		230503nc510.pdf
<510>	Descriptive document for Service Quality Standards & Consumer Protection R	ules Compliance
<515>	Certify compliance with applicable minimum service standards	

<010>	Study Area Code	230503
<015>	Study Area Name	SURRY MEMBERSHIP
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter
<035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@vantagepnt.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	230503nc610.pdf

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										Total post line Batter and Energy													
										Mandatory Extended Area	4												
					-	щo				and orbital leavest													
		RSHIP		ı	6059951793 ext.	Leah.Richter@vantagepnt.com				State Subceriber Line Charce	30						See attached worksheet						
	230503	SURRY MEMBERSHIP	2018	lata Leah Richter	data line <030>	n data line <030>	1/1/2017			Residential Local							See at						
				act regarding this c	erson identified ir	person identified i	1/1			Pate Tune													
n nemigan Program Pentina Europe				should cont	Number of p	Address of	ective Date	ervice Charge		CAC (CETC)											-		
	1 Code	Name .	ear	Contact Name - Person USAC should contact regarding this data	Contact Telephone Number - Number of person identified in data line <030>	Contact Email Address - Email Address of person identified in data line <030>	Residential Local Service Charge Effective Date	Single State-wide Residential Local Service Charge		()] () ebushova	()												
	Study Area Code	Study Area Name	Program Year		Contact Te		Residential Lo	Single State-w		Crate													
1	<010>	<015>	<020>	<030>	<032>	<039>	<701>	<702>	<703>														

<010>	<010> Study Area Code	230503
<015>	<015> Study Area Name	SURRY MEMBERSHIP
<020>	<020> Program Year	2018
<030>	<030> Contact Name - Person USAC should contact regarding this data	Leah Richter
<032>	<035> Contact Telephone Number - Number of person identified in data line <030> 6059951793 ext.	6059951793 ext.
<039>	<039> Contact Email Address - Email Address of person identified in data line <030> Leah. Richter@vantagepnt.com	Leah. Richter@vantagepnt.com

_										 	
Usage Allowance Action Taken When Limit Reached (select)									:		
Usage Allowance (GB)											
Broadband Service - Upload Speed (Mbps)											
Broadband Service - Download Speed (Mbps)											
Total Rate and Fees				pou	por						
State Regulated Fees				See attach	Lorloboot	WOINSTIEGT -					
Residential Rate											
Exchange (IEC)											
State											
<711>		-								 	

<010>	Study Area Code		230503		
<015>	Study Area Name		SURRY MEMBERSHIP	HIP	
<020>	Program Year		2018		
<030>	- 1	Contact Name - Person USAC should contact regarding this data	Leah Richter		
<035>	- 1	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.	t.	
<039>		Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@	Leah.Richter@vantagepnt.com	
<810>	. Reporting Carrier	Surry Telephone Membership Corp			
<811>		Not Applicable			
<812>		N/A			
<813>					
		Affiliates		SAC	Doing Business As Company or Brand Designation
			c		7.0
			See att	See attached worksheet	#e[
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		HAZAYANA A			TO THE PARTY OF TH
		THE APPLICATION OF THE PROPERTY OF THE PROPERT			

\$010 \$	- 1	230503
<015>	Study Area Name	SURRY MEMBERSHIP
<020>	Program Year	2018
<030>	· Contact Name - Person USAC should contact regarding this data	Leah Richter
<035>	1	6059951793 ext.
<039>	Contact Email Address - Email Address of person identified in data	Leah. Richter@vantagepnt.com
<0006>	Does the filing entity offer tribal land services? (Y/N)	No
<910>	Tribal Land(s) on which ETC Serves	
	<b>1</b>	
<920>	Tribal Government Engagement Obligation	
		Name of Attached Document
If your	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes	
to confi	to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal povernment nursuant to	Select
§ 54.31	§ 54.313(a)(9) includes:	Yes or No or Not Applicable
<921>	Needs assessment and deployment planning with a focus on Tribal	
	community anchor institutions.	
<922>		
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>		
<929>	Compliance with Tribal Business and Licensing requirements.	

	1.0							
230503	SURRY MEMBERSHIP	2018	Lean Richter	6059951793 ext.	Leah. Richter@vantagepnt.com	Yes	kbps	
Study Area Code	Study Area Name		Contact Name - Person USAC should contact regarding this data	- 1	Contact Email Address - Email Address of person identified in data line <030>	Certify whether terrestrial backhaul options exist (Y/N)	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).	
<010>	<015>	<020>	<030>	<035>	<039>	<1100>	<1130>	

Š		
010	- 1	230503
\$050\$	Study Alea Name Program Year	SURRY MEMBERSHIP
<030>	1	2018
<035>	1	
<039>	Contact Email Address - Email Address of person identified in data line <030>	1
, ,		230503nc1210.pdf
<1710	<1210> TETHS & CONDITIONS OF VOICE LEIEPHONY LITELINE PLANS	
		Name of Attached Document
<1220>	Link to Public Website	HTTP http://surry.net/lifeline/
"Please check th or the website li § 54.422(a)(2) a annually report:	"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

			:
Price Cap 2016> Connect	rice Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} (016> Certification support used to build broadband connect America Phase II Reporting {47 CFR § 54.313(e)}		
017A>	017A> Connect America Fund Phase II recipient?		
2017C>	2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.		
2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information	
2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)		

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<015>	Study Area Name	SURRY MEMBERSHIP
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<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@vantagepnt.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)				
			Yes - At	tach Certifica	ation
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}				230503nc3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Do	cument Li:	sting Required	
(3012A)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	No - No New Communit	y Anchors	3	
(3012B)	Please Provide Attachment	Name of Attached Do	cument Lis	sting Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}		<b>©</b>	0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	•	O	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		[	<u></u>	
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		L	<b>✓</b>	230503nc3017.pdf
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Do- Information	cument Lis	sting Required	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	0	0	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement				
	and Statement of Cash Flows			·	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:				
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers				
(3023)	Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.				
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows				r
(3026)	Attach the worksheet listing required information	Name of Attached Do- Information	cument Lis	sting Required	

### Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

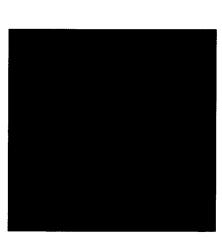
(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



<010>	Study Area Code	230503
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<020>	Program Year	2018
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<039>	Contact Email Address - Email Address of person identified in data I	ine <030> Leah.Richter@vantagepnt.com

### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

### Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001.** Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

### Community Anchor Institutions – FCC 14-98 (paragraph 79)

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

### If yes to 4003A, please provide a response for 4003B.

relevant geographic area.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	
Broadband Deployment Locations – FCC 14-98 (para	agraph 80)	
4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	
4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the	Name of Attached Document Listing Required Information	

<010>	Study Area Code	230503
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<020>	Program Year	2018
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<035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@vantagepnt.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.			
Name of Reporting Carrier: SURRY MEMBERSHIP			
Signature of Authorized Officer: CERTIFIED ONLINE		Date 06/20/2017	
Printed name of Authorized Officer: Amy Hanson			
Title or position of Authorized Officer: Chief Operating Officer			
Telephone number of Authorized Officer: 3363744517 ext.			
Study Area Code of Reporting Carrier: 230503	Filing Due Date for this form: 07/03/2017		

<010>	Study Area Code	230503
<015>	Study Area Name	SURRY MEMBERSHIP
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter
<035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@vantagepnt.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)_ also certify that I am an officer of the reporting carrier; n agent; and, to the best of my knowledge, the reports and	is authorized to submit the information reported on behalf of the reporting carrier. responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized at a provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI Recipie	nts on Behalf of Reporting Carrier
i, as agent for the reporting carrier, certify that I am auti the data reported herein based on data provided by the	norized to submit the annual reports for universal service support reporting carrier; and, to the best of my knowledge, the informat	recipients on behalf of the reporting carrier; I have provided ion reported herein is accurate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Fitle or position of Authorized Agent or Employee of Agen	t	
Felephone number of Authorized Agent or Employee of A	gent:	

Attachments

סאמרת		SURRY MEMBERSHIP	2018	Leah Richter	6059951793 ext.	Leah. Richter@vantagepnt.com	
(1))> Study Area Code	ממל ערם בספר	<015> Study Area Name	<020> Program Year	<030> Contact Name - Person USAC should contact regarding this data	<035> Contact Telephone Number - Number of person identified in data line <030> 6059951793 ext.	<039> Contact Email Address - Email Address of person identified in data line <030> Leah. Richter@vantagepnt.com	<701> Residential Local Service Charge Effective Date 1/1/2017 <702> Single State-wide Residential Local Service Charge
50.00		<015>	<020>	<030>	<035>	<039>	<701> <702>

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees	
NC	336-352		FR	14.0	6.5	1.13	0.0	21.63	
NC	336-374		FR	14.0	6.5	1.13	0.0	21.63	
NC	336-320		FR	14.0	6.5	1.13	0.0	21.63	
NC	336-325		FR	14.0	6.5	1.13	0.0	21.63	
NC	336-351		FR	14.0	6.5	1.13	0.0	21.63	
NC	336-366		FR	14.0	6.5	1.13	0.0	21.63	
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<010>	<010> Study Area Code	230503
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<039>	<0.39> Contact Email Address - Email Address of person identified in data line <0.30> Lean. Richter@vantagepnt. com	Leah. Richterevantadennt.com

wance	en	When Limit Reached {select}	Other, None at this time							-						
Usage Allowance	Action Taken	When Limit	Other, None													
Usage Allowance	(GB)		666666	666666	666666	666666	666666	566666								
Broadband Service - Broadband Service	-Upload Speed (Mbps) (GB)	·	0.0	0.0	0.0	0.0	0.0	0.0								
Broadband Service -	Download Speed	(Mbps)	1.13	1.13	1.13	1.13	1.13	1.13								
Total Rates	and Fees		14.0	14.0	14.0	14.0	14.0	14.0								
State Regulated	Fees		14.0	14.0	14.0	14.0	14.0	14.0								
Residential	Rate		0.0	0.0	0.0	0.0	0.0	0.0								
(Cally controlled)	Exchange (ILEC)		336-352	336-374	336-320	336-325	336-351	336-366				ļ				
	State		NC	NC	NC	NC	NC	NC								

<711>

<010>	Study Area Code	230503	
<015>	Study Area Name	SURRY MEMBERSHIP	THE PROPERTY OF THE PROPERTY O
<020>	Program Year 2018	88	
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter	The second secon
<035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@vantagepnt.com	
6	Bosseline Membership Corp		
\$11¢	Holding Company		
<812>	1		
<813>			
1	Affiliates	SAC	Doing Business As Company or Brand Designation
	Carolina West Wireless		Carolina West Wireless
	WSS, LLC		WSS, LLC
	Access On		Access On
	Piedmont Communications Services, Inc.	230497	Piedmont Communications Services, Inc.
	Piedmont Communications Services, Inc.	230497	Surry Telecommunications, Inc.
	- Andrewsky		

Attachment Line 330

CERTIFICATION OF SURRY TELEPHONE MEMBERSHIP CORP

Reporting Period January 1 - December 31, 2016

Sec. 54.313(a)(3) Unfulfilled Broadband Service Requests Resolution

Pursuant to § 54.313(a)(3) for High-cost Recipients, Carrier hereby certifies that it had unfulfilled

requests for broadband service within 2016. Customers had requested broadband services in

carrier's advertisements but were beyond the distance constraints of broadband over twisted

copper pair cable. To resolve this issue, Carrier is working on improving their broadband

capabilities in order to increase their wireless broadband capacity and enabling them to offer

broadband services to those who had requested service.

I verify that the foregoing is true and correct. Executed on June 13, 2017.

/s/ Amy R. Hanson

Amy R. Hanson

**Chief Operating Officer** 

Surry Telephone Membership Corp.

CERTIFICATION OF SURRY TELEPHONE MEMBERSHIP CORP

Reporting Period January 1 - December 31, 2016

Sec. 54.313(a)(5) and Sec. 54.422 Service Quality Standards and Consumer Protection

**Rules Compliance** 

Pursuant to § 54.313(a)(5) for High-cost Recipients and § 54.422 for Lifeline Support Recipients,

Surry Telephone Membership Corp hereby certifies that it is in compliance with applicable service

quality standards and consumer protection rules. Surry Telephone Membership Corp follows

Customer Proprietary Network Information (CPNI) rules and also files the annual CPNI

certification with the FCC pursuant to the FCC's current CPNI rules and regulations.

I verify that the foregoing is true and correct. Executed on June 13, 2017.

/s/ Amy R. Hanson

Amy R. Hanson

**Chief Operating Officer** 

Surry Telephone Membership Corp.

CERTIFICATION OF SURRY TELEPHONE MEMBERSHIP CORP

Reporting Period January 1 – December 31, 2016

Sec. 54.313(a)(6) and Sec. 54.422 Ability to Function in an Emergency Situation

Pursuant to § 54.313(a)(6) for High-cost Recipients and § 54.422 for Lifeline Support Recipients,

Surry Telephone Membership Corp hereby certifies that it is able to function in emergency

situations as set forth in § 54.202(a)(2). Surry Telephone Membership Corp is able to remain

functional in an emergency situation through the use of back-up power to ensure functionality

without an external power source. All Surry Telephone Membership Corp electronic equipment

locations are equipped with battery backup facilities which are designed for eight hours of reserve

power. Critical locations such as central offices also are equipped with stand-by generators. This

equipment enables it to provide service for a reasonable period of time if external power is lost.

Surry Telephone Membership Corp's network is engineered to handle reasonable excess traffic

in the event of traffic spikes resulting from emergency situations. Surry Telephone Membership

Corp has redundancy in its network for use in re-rerouting traffic when facilities are damaged.

I verify that the foregoing is true and correct. Executed on June 13, 2017.

/s/ Amy R. Hanson

Amy R. Hanson

**Chief Operating Officer** 

Surry Telephone Membership Corp.

Attachment Line 1010

CERTIFICATION OF SURRY TELEPHONE MEMBERSHIP CORP

Reporting Period January 1 – December 31, 2016

47 CFR 54.313(a)(10) - Voice Services Rate Comparability

Pursuant to 47 CFR 54.313(a)(10) for High-cost Recipients, Carrier hereby certifies that the pricing

of Carrier's voice services is no more than two standard deviations above the applicable national average

urban rate for voice service, as specified in the most recent public notice issued by the Wireline

Competition Bureau and Wireless Telecommunications Bureau.

The WCB announced that the average local end-user rate plus state regulated fees of the

surveyed incumbent LECs in urban areas is \$49.51. This was published in the FCC's Public Notice, WC

Docket No. 10-90, DA 17-167, released February 14, 2017. Carrier's voice service rates are less than two

standard deviations in relation to the applicable 2017 national average urban rate as established by the

WCB.

I verify that the foregoing is true and correct. Executed on June 13, 2017.

/s/ Amy R. Hanson

Amy R. Hanson

**Chief Operating Officer** 

Surry Telephone Membership Corp.

### CERTIFICATION OF SURRY TELEPHONE MEMBERSHIP CORP

### Reporting Period January 1 – December 31, 2016

### 47 CFR 54.313(g) - Broadband Services Rate Comparability

Pursuant to 47 CFR 54.313(g) for High-cost Recipients, Carrier hereby certifies that the pricing of Carrier's broadband services is no more than two standard deviations above the applicable national average urban rates for broadband service, as specified in the most recent public notice issued by the Wireline Competition Bureau and Wireless Telecommunications Bureau.

The following table was published in the FCC's Public Notice, WC Docket No. 10-90, DA 17-167, released February, 2017. The table provides the 2017 benchmark for a number of different broadband service offerings.

Download Speed (Mbps)	Upload Speed (Mbps)	Usage Allowance (GB)	Benchmark
10	1	100	\$76.47
10	1	150	\$76.97
10	1	250	\$77.37
10	1	Unlimited	\$77.98
25	3	250	\$89.92
25	3	Unlimited	\$90.53
25	5	250	\$90.16
25	5	Unlimited	\$90.76

I verify that the foregoing is true and correct. Executed on June 13, 2017.

/s/ Amy R. Hanson

Amy R. Hanson

Chief Operating Officer

Surry Telephone Membership Corp.

### **Surry Telephone North Carolina Lifeline Application**

### **Application for Lifeline**

- Lifeline is a federal benefit and willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment or being barred from the program
- Only one Lifeline service is available per household
- A household is defined, for purposes of the Lifeline program, as any individual or group of individuals who live together at the same address and share income and expenses
- A household is not permitted to receive Lifeline benefits from multiple providers
- Violation of the one-per-household limitation constitutes a violation of the Federal Communications Commission's (or "FCC") rules and will result in the subscriber's de-enrollment from the program
- Lifeline is a non-transferable benefit and the subscriber may not transfer his or her benefit to any other person.

### How to apply: four steps

- 1. Choose whether you will apply because you participate in a qualifying program or because your total household income falls within the guidelines.
- 2. Fill out the form. You must indicate your service address as well as your billing address (if not the same as your service address), as well as your SSN and your date of birth.
- 3. You must provide photocopies of either the program or income documents.
- 4. You must sign the bottom of the application indicating that you are complying with the Lifeline benefit rules.

### **Qualifying Methods**

You may qualify for Lifeline either because you participate in one of the following programs or because your income is within the following guidelines. **NOTE**: You may receive Social Security and Medicare benefits, but to qualify for Lifeline, you must receive benefits from one of the following programs or your income must fall within the guidelines.

You MUST send photocopies of any qualifying documentation. NOTE: SEND PHOTOCOPIES ONLY; WE WILL NOT RETURN ANY DOCUMENTATION.

### **Program Eligibility**

- Supplemental Nutrition Assistance Program (SNAP)
- Federal Public Housing/Section 8
- Veterans Pension or Survivors Pension benefit
- Income Based Eligibility
- Medicaid
- Supplemental Security Income (SSI)

Documentation includes a photocopy of a card or an award letter.

### **Income Eligibility**

A				1.0:				
Annual I	ncome Ba	asea on F	iousenoid	Size				
1	2	3	4	5	6	7	8	For each add'l person
								+ \$4,160/person
\$11,880	\$16,020	\$20,160	\$24,300	\$28,440	\$32,580	\$36,730	\$40,890	· + ./=00/po.30//

Documentation needed to qualify for Lifeline through income is noted on next page.

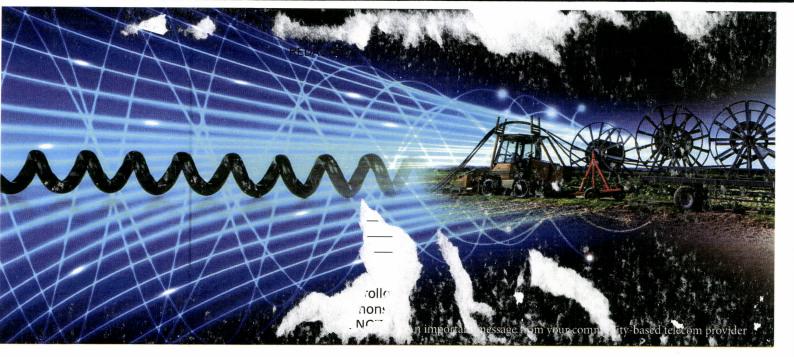
### REPACTED-FO Surry Telephoric North

IC INSPECTION / ina Lifeline Application

When completed, mail form to:

### Surry Telephone P. 7. Box 385, Dobson, NC 27017

Customer Name:		
Customer Service Address:		Temporary(required): Yes:No:
City:	State:	Zip Code:
Customer Bill Address:		· · · · · · · · · · · · · · · · · · ·
City:S	State:	Zip Code:
Customer's Home Telephone:		Zip code:
Customer's Social Security Number		
Customer's Date of Birth xx/xx/xxx		
Sastomer & Bate of Birth ANY ANY ANA	•	
Please choose 1 OR 2.		
	act one of th	de a recome de la colonia de l
providing a photocopy of a docu	ment that de	eighting programs (check all that apply) and I am trates my participation in one of these programs.
NOTE: SEND PHOTOCOPIES ON	LY; WE WILL	RETURN ANY DOCUMENTATION.
☐ Supplemental Nutrition Assistance (SNAP)		☐ Veterans Pension or Survivors Pension benefit
Medicaid		☐ Supplemental Security Income (SSI)
☐ Federal Public Housing/Section 8		
2. I certify that my total household	income falls	within the guidelines listed on Page 1 and I also certify
providing a photography of the falls	in my nouse	hold (required): Adults Children I am
providing a photocopy of the follo		
Prior year's state or federal tax retu		ement / pension statement of benefits
Current income statement from an	∐ Unen	nployment/Workmen's Compensation statement of benefits
employer		
Paycheck stubs for most recent 3	☐ Fede	ral notice letter of participation in General Assistance
months		
Social Security statement of benefit		ans Administration Statement of Benefits
☐ Child Support document	Othe	r official document containing income information
☐ Divorce decree		
I certify, under penalty of perjui	v. that:	
I meet the income-based or process.	gram-hased (	eligibility criteria for receiving Lifeline, shown above.
2. I will notify the carrier within 30	days if for a	ny reason I no longer satisfy the criteria for receiving
Lifeline including as relevant if	I no longer n	neet the income-based or program-based criteria for
receiving Lifeline support. I am a	eceiving mo	e than one Lifeline benefit, or another member of my
household is receiving a Lifetine	benefit	e triali one Lifetine benefit, or another member of my
household is receiving a Lifeline		Francis address to Commo Talente 1997 and 1
5. If I move to a new address, I will	ii provide tha	t new address to Surry Telephone within 30 days.
4. My nousenoid will receive only o	ne liteline se	rvice and, to the best of my knowledge, my household is
not already receiving a Lifeline s		
5. The information contained in this	s certification	form is true and correct to the best of my knowledge.
<ol><li>I acknowledge that providing fall</li></ol>	se or fraudul	ent information to receive Lifeline benefits is punishable
by law.		
<ol><li>I acknowledge that I may be req</li></ol>	uired to re-c	ertify my continued eligibility for Lifeline at any time, and
my failure to re-certify my continuity Lifeline benefits.	nued eligibilit	y will result in de-enrollment and the termination of my
	to release ar	y of my information contained in this Lifeline Application
required for the administration of th	e Lifeline pro	gram to the FCC or its designee, including the Universal
Service Administrative Company, an	d to any stat	e and federal agency, as required by law.
		, , ,
Applicant's Signature:		Date:

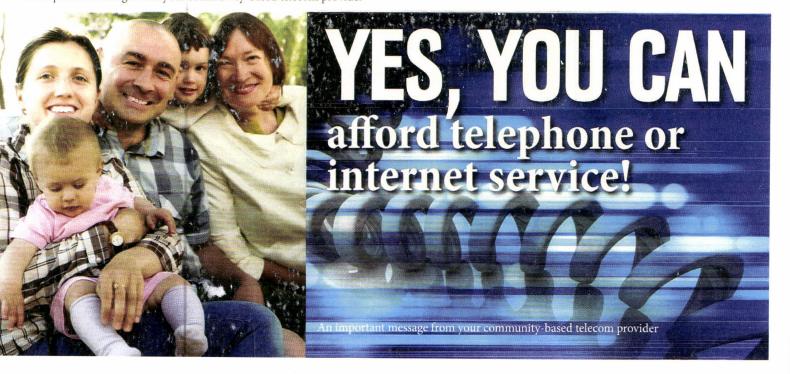




4121 Wilson Boulevard, Suite 1000 Arlington, VA 22203

www.frs.org

An important message from your community-based telecom provider



### community-based telecom provider is pleased to offer Lifeline service — providing discounted telephone or internet service for eligible consumers.

The Lifeline Universal Service Program is a government supported program available to qualified, low-income consumers and offers a discount for eligible services. Eligible services include telephone and internet service (the latter as of December 2, 2016). If you are an existing telephone service subscriber receiving the monthly Lifeline discount, you can continue to apply that discount to your home or cell phone voice service. But you can only receive a discount on ONE option — telephone or internet.

### How to Qualify for a Lifeline Discount

You must participate in at least one of the following programs to be eligible for a Lifeline Program discount:

- Supplemental Nutrition Assistance Program (SNAP)
- Supplemental Security Income (SSI)
- Medicaid
- Federal Public Housing Assistance
- Veterans Pension and Survivors Benefit Program
- Bureau of Indian Affairs General Assistance
- Tribally-administered Temporary Assistance for Needy Families (TTANF)
- Food Distribution Program on Indian Reservations (FDPIR)
- HEAD Start
- Income below the Federal Poverty Guideline

If you signed up for a Lifeline discount through the National School Lunch Program, Temporary Assistance for Needy Families, Low-Income Home Energy Assistance Program, or any other state-run program, your phone or internet provider may ask you to confirm your enrollment in one of the above, eligible programs when they do your next eligibility confirmation.

### Services Eligible for the Lifeline Discount

Lifeline telephone and internet services will have to provide certain minimum features. Lifeline-discounted services must offer at least:

- 500 minutes per month for cell phone voice plans
- 500 MB per month at 3G speeds for cell phone data plans
- 150 GB per month at 10/1 download/upload speeds for home internet plans

Exception: In those areas where the provider does not offer speeds at or above 10/1 download/upload, they must provide the highest performing, generally available home internet plans, which must be at least 4/1 download/upload.

### **Changing Companies**

If you decide to apply your monthly Lifeline discount to either home internet service or a data plan for your cell phone, you must remain with the company that provides your service for at least 12 months. After that, you are free to switch to a different company. If you move to a different state or to an area where your company does not offer service, let your company know. They will guide you through the process of changing companies.

If you sign up for new home or cell phone voice service, you need to stay with your company for at least 2 months. If you choose to apply your discount to a bundle, ask the company which change policy applies.



This brochure was produced by the Foundation for Rural Service (FRS), the philanthropic arm of NTCA—The Rural Broadband Association. FRS seeks to sustain and enhance the quality of life in America by advancing an understanding of rural issues. For more information on FRS visit www.frs.org. This educational campaign is supported by the Rural Telephone Finance Cooperative (RTFC).

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CERTIFICATION OF SURRY TELEPHONE MEMBERSHIP CORP

Reporting Period January 1 – December 31, 2016

Sec. 54.313(f)(1)(i) Milestone Certification

Pursuant to § 54.313 f)(1)(i) for Rate-of-Return Carriers, Carrier hereby certifies it is taking

reasonable steps to provide upon reasonable request broadband service at actual speeds of at

least 4 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications,

including Voice over Internet Protocol, and usage capacity that is reasonably comparable to

comparable offerings in urban areas as determined in an annual survey, and that requests for

such service are met within a reasonable amount of time.

I verify that the foregoing is true and correct. Executed on June 13, 2017.

/s/ Amy R. Hanson

Amy R. Hanson

**Chief Operating Officer** 

Surry Telephone Membership Corp

### **SURRY TELEPHONE MEMBERSHIP CORP (SAC 230503)**

### **ATTACHMENT LINE 3017**

Financial Reports
Pursuant to 47 C.F.R § 54.313(f)(2)

ATTACHMENT REDACTED IN ENTIRETY